Appendix 18

Request for Verification (FS-6500-25)

FS-6500-25 (05/96) OMB No. 0596-0012 Expires 05/31/99

U.S. DEPARTMENT OF AGRICULTURE, FOREST SERVICE REQUEST FOR VERIFICATION

| (Reference FSH 6509.18) | | | |
|---|---------------------------|------------|--|
| | | Forward di | rectly to bank or lending institution. |
| Lender - Please complete Items 6 thru 15. Return directly to: National Forest, | | | ATTN: |
| | PART I: | REQUEST | |
| 1. TO: (Name and Address of Bank | | 2. FROM: | (Name and Address of Applicant) |
| other Lending Institution) | | Z. FROM. | (Name and Address of Applicant) |
| |) | | |
| | | | |
| THE OF LOGOVINE | 3. Statement Of Applicant | | GYUDDEN YED AN ANGE |
| TYPE OF ACCOUNT | ACCOUN | Γ NUMBER | CURRENT BALANCE |
| Checking Account | | | |
| Savings Account | | | |
| Other | | | |
| I have applied for a <u>timber sale contract</u> or <u>concessionaire permit</u> (please cross one out) with the National Forest and state that my balances with the bank or lending institution named in Item 1 are as shown in Item 3. My signature below authorizes verification of the information. Your response is solely a matter of courtesy for which no responsibility is attached to your institution of any of your <u>officers</u> . 4. Signature of Applicant 5. Date | | | |
| | PART II: VE | RIFICATION | |
| 6. Does applicant have any outstanding l YES NO If yes, fill in | oans? | | 10. Is the account less than 2 months old? YES NO If yes, fill in Item 11. |
| 7. <u>TYPE OF LOANS</u> <u>MONTHLY</u> | | T BALANCE | 11. Date account was opened: |
| Secured | | | |
| | | | 12. Payment Experience: |
| Unsecured | | | Favorable Unfavorable |
| 8. Is applicant's statement in Item 3 correct? | | | If unfavorable, please explain in remarks. |
| YES NO If no, fill in Item 9. | | | |
| 9. CURRENT BALANCES | | | |
| Checking | Savings | | |
| 13. Remarks: | | | |
| THE INFORMATION ON THIS FORM IS THROUGH THE HANDS OF THE APPLI | | | MITTED DIRECTLY, WITHOUT PASSING |
| 14. Signature of bank or lending official | | | 15. Date |
| | | | |
| Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for | | | |
| reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and estimate or any | | | |
| other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture. Clearance | | | |

Officer, OIRM, Room 404-W, Washington, D.C. 20250; and to the Office of Management and Budget, Paperwork Reduction Project

(OMB# 0596-0012), Washington, D.C. 20503.